

2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Nov 09, 2010
Secretary of State**

DOCUMENT# N94000003775

Entity Name: EUCHEEANNA "OLD SCHOOL HOUSE" COMMUNITY CENTER, INC.

Current Principal Place of Business:

301 MCKINNON BRIDGE ROAD
PONCE DE LEON, FL 32455 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 122
ARGYLE, FL 32422 US

New Mailing Address:

FEI Number: 59-3260921 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARMSTRONG, JAMES
8823 CO HWY 280 E
DE FUNIAK SPGS, FL 32433 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JAMES ARMSTRONG

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: BROWN, CAROLYN
Address: 220 HOWELL AVE
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: T
Name: FOSS, PATSY
Address: 662 MCKINNON BRIDGE RD
City-St-Zip: PONCE DE LEON, FL 32455

Title: VD
Name: CURTIS, MEAGAN
Address: 750 MCKINNON BRIDGE RD.
City-St-Zip: PONCE DE LEON, FL 32455

Title: SD
Name: BROWN, CONNIE
Address: 1512 MCKINNON BRIDGE RD.
City-St-Zip: PONCE DE LEON, FL 32455

Title: D
Name: LAW, JOHN
Address: 866 WHITE CREEK RD.
City-St-Zip: PONCE DE LEON, FL 32455

Title: D
Name: LINDSEY, CHARLOT
Address: 230 E INDIAN CREEK RANCH RD.
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PATSY S. FOSS

T

11/09/2010

Electronic Signature of Signing Officer or Director

Date